



VILLAGE OF SLEEPY HOLLOW RECREATION
2021 KAYAK STORAGE RACK APPLICATION FORM

Date_____

Slip # assigned_____

Sticker #_____

(if renewing, put last season's sticker #)

Name_____

Address_____

Cell phone #_____ Home phone #_____

Email address_____

Emergency contact information:

Name_____ Relationship_____

Cell phone #_____ Home phone #_____

I have read the information provided and agree to follow all the rules of the Sleepy Hollow Recreation Department.

Slip Holder's Signature_____

Print name_____ Date_____

Approval signature of Village of Sleepy Hollow staff_____